

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A		10/22/01
O.I.P.E. CLASSIFIER		10	11-5-01
FORMALITY REVIEW	W	618	11/16/01
RESPONSE FORMALITY REVIEW	AM	917	03-11-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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Best Available Copy

THC 11/18 11-19-01  
 10809 3/11/02